

ISSUE SLIP STAPLE AREA (for additional cross references)

10-18-00

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BS		09/11/00
O.I.P.E. CLASSIFIER	LS	32	9/13
FORMALITY REVIEW	AF	829	10/16/00
RESPONSE FORMALITY REVIEW	L244	3C851	03-27-01

## INDEX OF CLAIMS

✓ .....	Rejected	N .....	Non-elected
= .....	Allowed	I .....	Interference
— (Through numeral) ...	Canceled	A .....	Appeal
÷ .....	Restricted	O .....	Objected

Claim	Date			
Original	11	4	10	4
Final	27	28	29	15
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Claim	Date					
Final	Original	1	4	10	4	
24		28	28	28	52	
26		05	05	05	07	
51		✓	✓	✓	✓	
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100		✓	✓	✓	✓	

Claim	Date
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If more than 150 claims or 10 actions  
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